Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			MO				Í	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			H () minus 20=		. 20			X\$ 9=		OR	X\$18=	360
INDEPENDENT CLAIMS			H min	nus 3 =	* /			X42=		OR	X84=	847
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	less than zero, enter "0" in column			olumn 2		TOTAL	F	OR	TOTAL	494
CLAIMS AS AMENDED - PART II									4	•	OTHER	THAN
		(Column 1)	4	(Colur		(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER		HIGH NUM PREVIO	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	PAID **	FUR	=		X\$ 9=	ree.	OR	X\$18=	FEE
	Independent	*	Minus	***		=	1	X42=		OR	X84=	
	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	PENDENT	CLAIM							
		* 2					Į	+140=	-	OR	+280= TOTAL	
								TOTAL ADDIT, FEE		OR	ADDIT, FEE	
_	And the second	(Column 1) CLAIMS		(Colur		(Column 3)	· 1 •			i 1		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	addi- Tional Fee
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u> =		X42=		OR	X84= '	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	ENDENT	CLAIM		l	440				
		· •						+140=		OR	+280=	
							,	TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	1
	e man	(Column 1) CLAIMS		(Colur		(Column 3)				•		•
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=			X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDENT		CLAIM		I ∤			OR		
*	f the entry is solv	mn 1 in lose than t	he ontre in oct	mn O web	"O" in co	lumo 3	L	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
		imber Previously Pa nber Previously Pa					er fou	ind in the app	oropriate box	k in co	lumn 1.	